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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Tatsumi Tsutsui

Application No. 10/718,548

Filed: November 24, 2003

For: COMMUNICATION DEVICE, HOST APPARATUS, AND COMMUNICATION  
METHOD

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:  
Atty Docket: 19546.0046  
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:  
Art Unit: TBD  
:  
:  
Examiner: TBD  
:

**STATUS INQUIRY**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313

Sir:

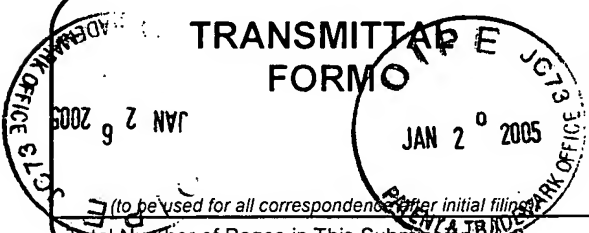
Please advise the undersigned of the status of the above-identified application and the date on which the undersigned may expect to receive an office action.

No fees are believed to be due with this request, however the Commissioner is hereby authorized to charge any fees to our deposit account 19-5127.

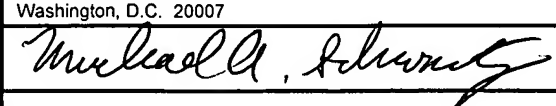
Respectfully submitted,

Date: January 26, 2005

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 <p><b>TRANSMITTAL FORM</b></p> <p>(to be used for all correspondence after initial filing)</p> <p>Total Number of Pages in This Submission: 2</p>	Application Number	10/718,548
	Filing Date	November 24, 2003
	First Named Inventor	Tatsumi Tsutsui
	Art Unit	TBD
	Examiner Name	TBD
Attorney Docket Number		19546.0046

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Status Inquiry
<div style="border: 1px solid black; padding: 5px;"> <b>Remarks</b> </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Swidler Berlin LLP 3000 K Street, N.W., Suite 300 Washington, D.C. 20007		
Signature			
Printed Name	Michael A. Schwartz		
Date	January 26, 2005	Reg. No.	40,161

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
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